#### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 1 of 73

Fill in this information to identify your c	ase:	
United States Bankruptcy Court for the: WESTERN DIST. OF NORTH CAROLINA		
Case number (if known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
I. Your full name		
Write the name that is government-issued pi identification (for exar	cture Edwin First Name	Tonja First Name
your driver's license o passport).		Middle Name
Bring your picture identification to your n	Billingsley Last Name	Billingsley Last Name
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
. All other names you		Tonja
have used in the last years	8 First Name	First Name
Include your married of maiden names.	Middle Name r	Middle Name  Wills-Billingsley
maiden names.	Last Name	Last Name
6. Only the last 4 digits your Social Security	of xxx - xx - <u>5</u> <u>2</u> <u>7</u>	
number or federal Individual Taxpayer	OR	OR
Identification numbe	9xx - xx	9xx - xx

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 2 of 73

		win E Billingsley nja M Billingsley			с	ase number (if kno	own)	
			About Debt	or 1:		About Debtor	2 (Spouse Only in	n a Joint Case):
4.	Any busine and Employ	/er	✓ I have	not used any busines	s names or EINs	. 📝 I have not	tused any busines	s names or EINs.
	(EIN) you ha		Business nam	е		Business name		
	Include trade	e names and	Business nam	е		Business name		
	doing busine	ess as names	Business nam	е		Business name		
			EIN			EIN		
			EIN			EIN		
5.	Where you	live				If Debtor 2 live	es at a different a	ddress:
			7532 Grab	ill Dr.				
			Number St	reet		Number Street	t	
			Charlotte	NC	28269			
			City	State	ZIP Code	City	State	ZIP Code
			Mecklenb	urg				
			County			County		
			the one abo	ing address is differ ove, fill it in here. No nd any notices to you ress.	te that the	from yours, fil	nailing address is Il it in here. Note to otices to you at thi	hat the court
			Number St	reet		Number Street	t	
			P.O. Box			P.O. Box		
			City	State	ZIP Code	City	State	ZIP Code
6.	Why you ar	-	Check one:			Check one:		
	bankruptcy		petition	ne last 180 days befor n, I have lived in this o any other district.	•	petition, I	ast 180 days befor have lived in this o y other district.	•
				another reason. Expl 8 U.S.C. § 1408.)	ain.		other reason. Expl J.S.C. § 1408.)	ain.
P	art 2: To	ell the Court Ab	out Your Ba	ankruptcv Case				
				. ,				
7.	The chapter	Code you		For a brief description y (Form 2010)). Also				
	are choosir under	ig to file	☐ Chapter	7				
			Chapter	11				
			Chapter	12				
			Chapter     Chapter	13				

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 3 of 73

Debtor 1 Edwin E Billingsley Tonja M Billingsley			Case number (if known)							
8.	How you will pay the fee	Ø	court pay v	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
				I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).						
			By la than fee ir	request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less han 150% of the official poverty line that applies to your family size and you are unable to pay the ee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.						
9.	Have you filed for	$\overline{\mathbf{V}}$	No							
	bankruptcy within the last 8 years?		Yes.							
		Dist	rict _		When	MM / DD / YYYY	Case number			
		Dist	rict _		When	MM / DD / YYYY	Case number			
		Dist	rict _		When	MM / DD / YYYY	Case number			
10.	Are any bankruptcy	$\overline{\checkmark}$	No							
	cases pending or being filed by a spouse who is		Yes.							
	not filing this case with you, or by a business	Deb	otor _			Relationsh	ip to you			
	partner, or by an affiliate?	Dist	rict _		When	MM / DD / YYYY	Case number,if known			
		Deb	otor _			Relationsh	ip to you			
		Dist	rict _		When	MM / DD / YYYY	Case number,if known			
11.	Do you rent your residence?		No. Yes.	Go to line 12.  Has your landlord obtained an eviction juresidence?	udgmen	t against you and	d do you want to stay in y	our		
				No. Go to line 12.  Yes. Fill out Initial Statement Abou and file it with this bankruptcy petiti		ction Judgment.	Against You (Form 101A)	ı		

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 4 of 73

	tor 1 Edwin E Billingsley tor 2 Tonja M Billingsley				_ Case number (if	known)		
Pa	Report About A	ny Bı	usine	sses You Own as a Sole P	roprietor			
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any 7532 Grabill Dr. Number Street				
				Charlotte		NC	28269	)
	If you have more than one			City		State	ZIP Cod	de
	sole proprietorship, use a separate sheet and attach it to this petition.			Check the appropriate box to des	•	I01(27A))		
				☐ Single Asset Real Estate (a☐ Stockbroker (as defined in ☐ Commodity Broker (as defined in ☐ None of the above	as defined in 11 U.S.C. 11 U.S.C. § 101(53A))	§ 101(51B))		
13.	13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>		<i>set ap</i> st rece	filing under Chapter 11, the court repropriate deadlines. If you indicate the same of the	te that you are a small erations, cash-flow state	business debi ement, and fe	tor, you deral inc	must attach your come tax return
	debtor?	$\overline{\mathbf{A}}$	No.	I am not filing under Chapter 11.				
	For a definition of small business debtor, see		No.	I am filing under Chapter 11, but the Bankruptcy Code.	I am NOT a small busi	iness debtor a	ccording	g to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chapter 11 and Bankruptcy Code.	I am a small business	debtor accord	ding to th	ne definition in the
Pa	Report If You Ov	wn o	r Hav	e Any Hazardous Property	or Any Property	That Need	s Imm	ediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention is needed,	, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property?Number	Street			
	ropano:							
				City		St	ate	ZIP Code

### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 5 of 73

			llingsley llingsley		Case	e number (if kno	own)		
Pa	art 5: E	xplain \	our Efforts to Re	eceive a Briefing About Cred	dit Cou	nseling			
t t t t t t t t t t t t t t t t t t t	Tell the cou whether yo have receiv briefing about credit counseling	u ved a out	counseling age filed this bankru certificate of co Attach a copy of	fing from an approved credit ncy within the 180 days before I ptcy petition, and I received a	You Department of the Point of	must check one received a brid ounseling age led this bankru ertificate of co	fing from an approved credit ncy within the 180 days before I uptcy petition, and I received a		
	that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.  If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.		counseling age	fing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have ompletion.	om an approved credit thin the 180 days before I petition, but I do not have etion.  I received a briefing from an counseling agency within the filed this bankruptcy petition a certificate of completion.  Within 14 days after you file the		ncy within the 180 days before I uptcy petition, but I do not have		
				fter you file this bankruptcy petition, copy of the certificate and payment			fter you file this bankruptcy petition, copy of the certificate and payment		
			services from a unable to obtain days after I mad	ked for credit counseling n approved agency, but was those services during the 7 e my request, and exigent merit a 30-day temporary quirement.	services from an approved agency, but was e services during the 7 unable to obtain those services during days after I made my request, and exige a 30-day temporary circumstances merit a 30-day tempora waiver of the requirement.				
			requirement, atta efforts you made were unable to o bankruptcy, and	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining whefforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.		
			dissatisfied with	our case may be dismissed if the court is issatisfied with your reasons for not receiving a riefing before you filed for bankruptcy.			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.		
			If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.			If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agenc along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.			
			•	the 30-day deadline is granted only limited to a maximum of 15 days.		•	the 30-day deadline is granted only limited to a maximum of 15 days.		
			☐ I am not require credit counselir	d to receive a briefing about g because of:		•	ed to receive a briefing abouting because of:		
			☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		
			☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or		

briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Active duty. I am currently on active military

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 6 of 73

Debtor 1 Debtor 2		Edwin E Billingsley Tonja M Billingsley							
P	art 6:	Answer These Q	uest	ions 1	or Reporting P	urpos	es		
16.	What ki	ind of debts do you	16a.	as "i □		vidual pr o.	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b.		•	or invest c.	iness debts? Business deb ment or through the operation		debts that you incurred to obtain e business or investment.
			16c.	State	e the type of debts	you owe	e that are not consumer or bu	siness	s debts.
17.	Are you	u filing under r 7?	<b>V</b>	No.	I am not filing und	er Chap	ter 7. Go to line 18.		
	any exc exclude adminis	estimate that after empt property is ed and strative expenses d that funds will be	Yes. I am filing under Chapter 7. Do you est administrative expenses are paid that f				•	-	• • • •
	availab	le for distribution ecured creditors?			Yes				
18.		any creditors do timate that you		1-49 50-99 100-19 200-99			1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you te your assets to th?		\$100,0	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to		\$100,0	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 7 of 73

Debtor 1 Debtor 2	Edwin E Billingsley Tonja M Billingsley		Case number (if known)
Part 7:	Sign Below		
For you		I have examined this petition, and I declare unde and correct.	r penalty of perjury that the information provided is true
		•	are that I may proceed, if eligible, under Chapter 7, 11, 12, d the relief available under each chapter, and I choose to
		If no attorney represents me and I did not pay or fill out this document, I have obtained and read the	agree to pay someone who is not an attorney to help me notice required by 11 U.S.C. § 342(b).
		I request relief in accordance with the chapter of	title 11, United States Code, specified in this petition.
		•	ng property, or obtaining money or property by fraud in ines up to \$250,000, or imprisonment for up to 20 years,
		X /s/ Edwin E Billingsley	X /s/ Tonja M Billingsley
		Edwin E Billingsley, Debtor 1	Tonja M Billingsley, Debtor 2
		Executed on 11/09/2017	Executed on 11/09/2017

MM / DD / YYYY

MM / DD / YYYY

### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 8 of 73

Debtor 1 Debtor 2	Edwin E Billingsley Tonja M Billingsley			Case number (if knov	wn)						
For your a	ttorney, if you are ed by one	eligibility to procee relief available un	ed under Chapter 7, 11, 12, nder each chapter for which t	or 13 of title 11, United St he person is eligible. I als	e informed the debtor(s) about ates Code, and have explained th so certify that I have delivered to	Э					
If you are not represented by an attorney, you do not need to file this page.			the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) ap certify that I have no knowledge after an inquiry that the information in the schedules filed with the is incorrect.								
		X /s/ Kimberly Signature of A	A. Sheek attorney for Debtor	Date	= 11/09/2017 MM / DD / YYYY						
		Kimberly A. Printed name	Sheek								
		Law Office of Firm Name P.O. Box 480	of Kimberly A. Sheek 0740								
		Number Charlotte, N	Street <b>C 28269</b>								
		www.sheekl	lawoffice.com								
		City		State	ZIP Code						
		Contact phone	e (704) 754-3770	Email address <b>kimb</b>	erlysheek@sheeklawfirm.co	n					
		34199 Bar number		NC State	_						

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 9 of 73

Fill in this in	formation to i	dentify your cas	se and this filing:		
Debtor 1	Edwin First Name	E  Middle Name	Billingsley  Last Name		
Debtor 2 (Spouse, if filing	Tonja ) First Name	<b>M</b> Middle Name	Billingsley Last Name		
United States Ba	ankruptcy Court fo	r the: <b>WESTERN [</b>	DIST. OF NORTH CAROLINA		
Case number (if known)				_	t if this is an ded filing
Official Form	n 106A/B				
Schedule A	/B: Propert	y			12/15
1. Do you own			ding, Land, or Other Real		e an Interest In
Yes. W  1.1.  7532 Grabill Dr.  Street address, if ava		What is	s the property? all that apply. gle-family home	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain	
		Du	plex or multi-unit building ndominium or cooperative	Current value of the entire property?	Current value of the portion you own?
Charlotte		<u> </u>	nufactured or mobile home	\$122,100.00	\$122,100.00
Mecklenburg County	State ZIF		estment property neshare	Describe the nature of you interest (such as fee sim entireties, or a life estate	ple, tenancy by the
Mecklenburg C	ounty Tax Valu	e Who ha	as an interest in the property?	Tenancy by the Entire	ties
\$122100		☐ De ☐ De ☑ De	btor 1 only btor 2 only btor 1 and Debtor 2 only least one of the debtors and anotl	Check if this is comr (see instructions)	nunity property
			nformation you wish to add abo		

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 10 of 73

	E Billingsley I Billingsley	Cas	se number (if known)		
1.2. Southbeach Resor Myrtle Beach, SC	ts Timeshare	What is the property? Check all that apply.  Single-family home	Do not deduct secured clai amount of any secured clai Creditors Who Have Claims	ms on Schedule D:	
		Duplex or multi-unit building Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?	
County		<ul> <li>─ Manufactured or mobile home</li> <li>─ Land</li> <li>─ Investment property</li> <li>✓ Timeshare</li> <li>─ Other</li> </ul>	\$0.00 \$0.00  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.		
		Who has an interest in the property? Check one.	Tenancy by the Entiret	ies	
		<ul> <li>□ Debtor 1 only</li> <li>□ Debtor 2 only</li> <li>☑ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> </ul>	Check if this is comm (see instructions)	unity property	
		Other information you wish to add about property identification number:	this item, such as local	_	
	•	own for all of your entries from Part 1, inclured and the series of the series own for the series of	_	\$122,100.00	
Part 2: Descr	ribe Your Vehicles		•		
3. Cars, vans, truck  □ No ☑ Yes	ks, tractors, sport utilit	ty vehicles, motorcycles			
3.1. Make:	Hyundai	Who has an interest in the property? Check one.	Do not deduct secured clair amount of any secured clair	ms on Schedule D:	
Model:	Sonata	Debtor 1 only	Creditors Who Have Claim		
Year:	2016	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
Approximate mileage:	30,000	<ul><li>✓ Debtor 1 and Debtor 2 only</li><li>✓ At least one of the debtors and another</li></ul>	\$15,225.00	\$15,225.00	
Other information:					
2016 Hyundai Sona miles), NADA Clear		Check if this is community property (see instructions)			
3.2.		Who has an interest in the property?	Do not deduct secured clai		
Make:	Ford	Check one.	amount of any secured clair Creditors Who Have Claim		
Model:	Ranger	Debtor 1 only  Debtor 2 only	Current value of the	Current value of the	
Year:	2008	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
Approximate mileage:	129,000	At least one of the debtors and another	\$7,600.00	\$7,600.00	
Other information: 2008 Ford Ranger (miles), XLT, short I Retail \$7600		Check if this is community property (see instructions)			
4. Watercraft, aircr		s and other recreational vehicles, other veh			
☑ No □ Yes	-				

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 11 of 73

	otor 1 otor 2	Edwin E Billingsley Tonja M Billingsley Case number (if known)	
5.		e dollar value of the portion you own for all of your entries from Part 2, including any for pages you have attached for Part 2. Write that number here	\$22,825.00
Р	art 3:	Describe Your Personal and Household Items	
Do	you own	or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6.	Exampl	nold goods and furnishings es: Major appliances, furniture, linens, china, kitchenware	
	☐ No ☑ Yes	s. Describe microwave, dishwasher, washer & dryer, lawn mower, couch, loveeat, recliner, kitchen table & 4 chairs, bedroom furniture, bed, dining room table & 4 chairs, 2 curio cabinets, pictures, figurines, refrigerator, stove/oven	\$3,600.00
7.		nics es: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	☐ No  ✓ Yes	s. Describe 2 TV's & 2 cell phones	\$400.00
8.		ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	☑ No □ Yes	s. Describe	
9.		nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	✓ No ☐ Yes	s. Describe	
10.	Firearn Example	ns es: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No	s. Describe	
11.	Clothes Example	s les: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No ✓ Yes	s. Describe Debtor's & Joint Debtor's clothes	\$300.00
12.	<b>Jewelr</b> Example	vies: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	☑ No □ Yes	s. Describe	
13.		rm animals les: Dogs, cats, birds, horses	
	□ No ✓ Yes	s. Describe Miniature greyhound and calico cat	\$2.00
14.	Any otl	ner personal and household items you did not already list, including any health aids you list	
		s. Give specific	

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 12 of 73

	otor 1 otor 2		win E Billingsley nja M Billingsley	Case number (if known)	
15.				entries from Part 3, including any entries for pages you have	\$4,302.00
Р	art 4:	D	escribe Your Finar	ncial Assets	
Do	you owr	n or I	have any legal or equita	able interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examp		Money you have in your petition	wallet, in your home, in a safe deposit box, and on hand when you file your	
	✓ No ☐ Yes			Cash:	
17.	•	les:		ther financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same	
	□ No ✓ Yes			Institution name:	
	17	7.1.	Checking account:	Checking account-Wells Fargo account # ending 6191	\$309.02
	17	7.2.	Checking account:	Checking account-BB&T account # ending 3143	\$0.00
	17	7.3.	Checking account:	Checking account-Charlotte Metro Credit Union account # ending 8956	\$169.73
	17	7.4.	Checking account:	Checking account-Business checking account at BB&T	\$0.00
	17	7.5.	Savings account:	Savings account-Charlotte Metro account # ending 8956	\$25.00
18.	<i>Examp</i> No	les:	tual funds, or publicly to Bond funds, investment	accounts with brokerage firms, money market accounts	
19.	-		ly traded stock and into	erests in incorporated and unincorporated businesses, including , and joint venture	
	info	s. G orma	ive specific tion about Name c	of entity: % of ownership:	
20.	Negotia	able i	instruments include pers	and other negotiable and non-negotiable instruments conal checks, cashiers' checks, promissory notes, and money orders. See you cannot transfer to someone by signing or delivering them.	
	info	s. G orma	ive specific tion about lssuer r	name:	
21.		les:	or pension accounts Interests in IRA, ERISA, profit-sharing plans	Keogh, 401(k), 403(b), thrift savings accounts, or other pension or	
	ш	s. Li	st each t separately.    Type of a	account: Institution name:	

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 13 of 73

	tor 1 tor 2	Edwin E Billings Tonja M Billings		Case number (if known	)	
22.	Your sh Example		payments posits you have made so that you may continue s n landlords, prepaid rent, public utilities (electric, g			
	✓ No ☐ Yes	S	Institution name or individual:			
23.	_		specific periodic payment of money to you, either	for life or for a number of yea	ars)	
	<b>☑</b> No					
	_		Issuer name and description:			
24.	26 U.S.	.C. §§ 530(b)(1), 529	<b>RA</b> , <b>in an account in a qualified ABLE program</b> A(b), and 529(b)(1).	, or under a qualified state t	uition pro	ogram.
	✓ No ☐ Yes	S	Institution name and description. Separately file	the records of any interests.	11 U.S.C.	§ 521(c)
25.		, equitable or future s exercisable for yo	interests in property (other than anything liste ur benefit	d in line 1), and rights or		
		s. Give specific prmation about them				
26.			marks, trade secrets, and other intellectual pro names, websites, proceeds from royalties and lice	• •		
	_	s. Give specific ormation about them				
27.			other general intangibles , exclusive licenses, cooperative association hold	ings, liquor licenses, professi	onal licen	ses
	<b>☑</b> No					
		s. Give specific ormation about them				
Mor	ney or pi	roperty owed to you	ı?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	funds owed to you				
	□ No					
			mation State: Anticipated 2017 State Tax	Refund. Amt: \$926.00	Federal	: <b>\$0.00</b>
		out them, including w already filed the ret			State:	\$926.00
	•	d the tax years			Local:	\$0.00
29.	_	support les: Past due or lum	p sum alimony, spousal support, child support, ma	aintenance, divorce settlemen	t, property	y settlement
	<b>☑</b> No					
	☐ Yes	s. Give specific infor	mation	Alimony:		
				Maintena	nce:	
				Support:		
				Divorce s	ettlement:	:
				Property s	settlement	t:

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 14 of 73

	otor 1 Edwin E Billingsley Tonja M Billingsley Case number (if known)	
	Case number (if known)	
30.	Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
	<ul> <li>No</li> <li>✓ Yes. Give specific information</li> <li>Potential back disability payments from social security.</li> </ul>	Unknown
31.	Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's in	surance
	No  Yes. Name the insurance company of each policy and list its value Company name:  Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died	
	✓ No ☐ Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	✓ No ☐ Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims	
	✓ No  Yes. Describe each claim	
35.	Any financial assets you did not already list	
	✓ No ☐ Yes. Give specific information	
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$1,429.75
P	art 5: Describe Any Business-Related Property You Own or Have an Interest In. List a	any real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	No. Go to Part 6.  ✓ Yes. Go to line 38.	
		Current value of the
		<pre>portion you own? Do not deduct secured</pre>
38.	Accounts receivable or commissions you already earned	claims or exemptions.
	<b>⋈</b> No	
	Yes. Describe	
39.	Office equipment, furnishings, and supplies  Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
	□ No ☑ Yes. Describe One HP all-in-one computer, one Dell computer, and HP Laserjet printer	\$300.00

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 15 of 73

	otor 2	Case number (if known)	
40.	Machinery, fixtures, equipment, supplies you use in business,	, and tools of your trade	
	✓ No ☐ Yes. Describe		_
41.	Inventory		
	☑ No ☐ Yes. Describe		_
42.	Interests in partnerships or joint ventures		
	✓ No ☐ Yes. Describe Name of entity:	% of ownership:	
43.	Customer lists, mailing lists, or other compilations		
	<ul> <li>No</li> <li>Yes. Do your lists include personally identifiable informated in the property of the property of</li></ul>	:ion (as defined in 11 U.S.C. § 101(41A))?	_
44.	Any business-related property you did not already list		
	<ul><li>✓ No</li><li>✓ Yes. Give specific information.</li></ul>		
45.	Add the dollar value of all of your entries from Part 5, includin attached for Part 5. Write that number here		0
	If you own or have an interest in farmland, list it is		
46.		i- or commercial fishing-related property?	
	✓ No. Go to Part 7.  ☐ Yes. Go to line 47.		
		Current value of the portion you own?  Do not deduct secured claims or exemptions.	
47.	Farm animals  Examples: Livestock, poultry, farm-raised fish		
	✓ No ☐ Yes		_
48.			
	Cropseither growing or harvested		
49.	_		_
	Cropseither growing or harvested  ☑ No ☐ Yes. Give specific	and tools of trade	_
	Cropseither growing or harvested  No Yes. Give specific information	, and tools of trade	_
50.	Cropseither growing or harvested  ✓ No  ☐ Yes. Give specific information	, and tools of trade	_

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 16 of 73

	tor 1 tor 2	Edwin E Billingsley Tonja M Billingsley	Case nu	ımber (if known)	
51.	Any far	m- and commercial fishing-related property you did r	not already list		
		s. Give specific			
52.	Add the	\$0.00			
Pa	art 7:	Describe All Property You Own or Have an	Interest in That You [	Did Not List Abov	e
53.		have other property of any kind you did not already les: Season tickets, country club membership	ist?		
	✓ No ☐ Yes	s. Give specific information.			
54.	Add the	e dollar value of all of your entries from Part 7. Write	that number here	·····→	\$0.00
Pa	art 8:	List the Totals of Each Part of this Form			
55.	Part 1:	Total real estate, line 2			\$122,100.00
56.	Part 2:	Total vehicles, line 5	\$22,825.00		
57.	Part 3:	Total personal and household items, line 15	\$4,302.00		
58.	Part 4:	Total financial assets, line 36	\$1,429.75		
59.	Part 5:	Total business-related property, line 45	\$300.00		
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7:	Total other property not listed, line 54	+\$0.00		
62.	Total p	ersonal property. Add lines 56 through 61	\$28,856.75	Copy personal property total	+\$28,856.75
63.	Total o	f all property on Schedule A/B. Add line 55 + line 62			\$150,956.75

#### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 17 of 73

Fill in this inf	ormation to iden			
Debtor 1	Edwin First Name	E Middle Name	Billingsley Last Name	
Debtor 2 (Spouse, if filing)	Tonja First Name	M Middle Name	Billingsley Last Name	
United States Bar Case number	nkruptcy Court for the	Check if this is an amended filing		
(if known)				· ·

Official Form 106C

#### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Clai	m as Exempt
1. Which	set of exemptions are you claiming?	Check one onl

1.	Which set of exemptions are you claiming?	Check one only, e	even	if your spouse is filing v	vith you.		
	✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B th	at you claim as exen	ıpt, 1	fill in the information b	elow.		
	f description of the property and line on edule A/B that lists this property	Current value of the portion you own	Amount of the Specific laws exemption you claim		Specific laws that allow exemption		
		Copy the value from Schedule A/B		eck only one box for h exemption			
753 Med Par	f description: 2 Grabill Dr. cklenburg County Tax Value \$122100 cel: 02769128 from Schedule A/B:1.1	\$122,100.00		\$60,000.00 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(1)		
201 mile	f description: 6 Hyundai Sonata (approx. 30000 es), NADA Clean retail \$15225 from Schedule A/B:3.1	\$15,225.00		\$3,500.00 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(3)		

3.	Are you claiming a homestead exemption of more than \$160,375?					
	(Subject to adjustment on $4/01/19$ and every 3 years after that for cases filed on or after the date of adjustment.					
	No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  No Yes					

#### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 18 of 73

Debtor 1 Edwin E Billingsley Debtor 2 Tonja M Billingsley Case number (if known) Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property exemption you claim the portion you own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$7,600.00 \$3,500.00 N.C. Gen. Stat. § 1C-1601(a)(3)  $\overline{\mathbf{Q}}$ 2008 Ford Ranger (approx. 129000 miles), 100% of fair market XLT, short bed, NADA Clean Retail \$7600 value, up to any applicable statutory Line from Schedule A/B: 3.2 limit Brief description: \$3,600.00 N.C. Gen. Stat. § 1C-1601(a)(4) \$3,600.00  $\overline{\mathbf{V}}$ microwave, dishwasher, washer & dryer, 100% of fair market lawn mower, couch, loveeat, recliner, value, up to any kitchen table & 4 chairs, bedroom applicable statutory limit furniture, bed, dining room table & 4 chairs, 2 curio cabinets, pictures, figurines, refrigerator, stove/oven Line from Schedule A/B: Brief description: \$400.00 \$400.00 N.C. Gen. Stat. § 1C-1601(a)(4)  $\overline{\mathbf{A}}$ 2 TV's & 2 cell phones 100% of fair market value, up to any Line from Schedule A/B: 7 applicable statutory limit Brief description: \$300.00 \$300.00 N.C. Gen. Stat. § 1C-1601(a)(4)  $\overline{\mathbf{Q}}$ **Debtor's & Joint Debtor's clothes** 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$2.00 N.C. Gen. Stat. § 1C-1601(a)(4) \$2.00  $\overline{\mathbf{V}}$ Miniature greyhound and calico cat 100% of fair market value, up to any Line from Schedule A/B: 13 applicable statutory limit Brief description: \$309.02 \$309.02 N.C. Gen. Stat. § 1-362  $\overline{\mathbf{Q}}$ Checking account-Wells Fargo account # 100% of fair market ending 6191 value, up to any applicable statutory Line from Schedule A/B: 17.1 limit Brief description: \$0.00 \$0.00 N.C. Gen. Stat. § 1-362 Checking account-BB&T account # ending 100% of fair market value, up to any applicable statutory Line from Schedule A/B: 17.2 limit Brief description: \$169.73 N.C. Gen. Stat. § 1-362 \$169.73  $\overline{\mathbf{Q}}$ **Checking account-Charlotte Metro Credit** 100% of fair market Union account # ending 8956 value, up to any applicable statutory Line from Schedule A/B: 17.3 limit

#### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 19 of 73

Debtor 1 Edwin E Billingsley Debtor 2 Tonja M Billingsley Case number (if known) Part 2: **Additional Page** Amount of the Brief description of the property and line on Current value of Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$25.00 \$25.00 N.C. Gen. Stat. § 1-362  $\overline{\mathbf{Q}}$ Savings account-Charlotte Metro account 100% of fair market # ending 8956 value, up to any applicable statutory Line from Schedule A/B: 17.5 limit Brief description: \$926.00 N.C. Gen. Stat. § 1C-1601(a)(2) \$926.00  $\mathbf{V}$ **Anticipated 2017 State Tax Refund** 100% of fair market value, up to any Line from Schedule A/B: 28 applicable statutory limit Brief description: Unknown \$0.00 42 U.S.C. § 407 ablaPotential back disability payments from 100% of fair market social security. value, up to any applicable statutory Line from Schedule A/B: limit Brief description: \$300.00 \$300.00 N.C. Gen. Stat. § 1C-1601(a)(4)  $\overline{\mathbf{Q}}$ One HP all-in-one computer, one Dell 100% of fair market computer, and HP Laserjet printer value, up to any applicable statutory Line from Schedule A/B: 39 limit

### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 20 of 73

Fill to Alste to 6		£					
Debtor 1		E Billing Middle Name Last Nan		_			
Debtor 2 (Spouse, if filing)		M Billing Middle Name Last Nan		-			
United States Bar	nkruptcy Court for the:	WESTERN DIST. OF NOF	RTH CAROLIN	<u>A</u>			
Case number (if known)					Check if this is amended filing		
Official Form	106D						
Schedule D:	Creditors Wh	o Have Claims Sec	ured by Pr	operty		12/15	
1. Do any credit  No. Che	No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Yes. Fill in all of the information below.						
claim, list the creditor has a	creditor separately for e particular claim, list the ible, list the claims in a	has more than one secured each claim. If more than one e other creditors in Part 2. As lphabetical order according to	Am Do	Jumn A nount of claim not deduct the ue of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.1		Describe the property th secures the claim:	at	\$12,977.21	\$7,600.00	\$5,377.21	
Creditor's name 7933 Preston Ro Number Street		<ul><li>2008 Ford Ranger</li></ul>		. ,		. ,	
Plano City Who owes the dek Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this c to a communit	ebtor 2 only the debtors and anotho laim relates by debt	As of the date you file, the Contingent Unliquidated Disputed  Nature of lien. Check all  An agreement you mand Statutory lien (such as Judgment lien from a Under Cincluding a right Purchase Money  Last 4 digits of account	I that apply. ade (such as mor s tax lien, mecha lawsuit nt to offset)	tgage or secured	car loan)		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$12,977.21

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 21 of 73

Debtor 1 Edwin E Billingsley Tonja M Billingsley		_ Case number (if	known)			
Part 1: Additional Page After listing any entries on sequentially from the previous		Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
Hyundai Capital America Creditor's name 3161 Michelson Dr., Suite 1900 Number Street	Describe the property that secures the claim: 2016 Hyundai Sonata	\$38,703.00	\$15,225.00	\$23,478.00		
Irvine CA 92612 City State ZIP Code  Who owes the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Purchase Money					
Date debt was incurred 06/11/2016  2.3  Ocwen Loan Servicing, LLC  Creditor's name PO Box 24737	Last 4 digits of account number  Describe the property that secures the claim:  7532 Grabill Dr.	\$121,636.91	\$122,100.00			
West Palm Beach FL 33416-4737  City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt	As of the date you file, the claim is:  Contingent Unliquidated Disputed  Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Other (including a right to offset) Mortgage	mortgage or secured	car loan)			
Date debt was incurred	Last 4 digits of account number					

Add the dollar value of your entries in Column A on this page. Write that number here:

\$160,339.91

### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 22 of 73

	dwin E Billingsley onja M Billingsley		_ Case number (if	known)		
Part 1:	Additional Page After listing any entries on sequentially from the previous		Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
Ocwen Loan Creditor's name PO Box 2473 Number Street		Describe the property that secures the claim: 7532 Grabill Dr.	\$5,096.88	\$122,100.00		
☐ Debtor 1 o ☐ Debtor 2 o ☑ Debtor 1 a ☐ At least on ☐ Check if the	State ZIP Code debt? Check one. nly	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit  Other (including a right to offset) Mortgage arrears				
Date debt was	incurred <u>Various</u>	Last 4 digits of account number				
Southbeach Creditor's name 3000 S. Ocea Number Street	an Blvd.	Describe the property that secures the claim: Southbeach Resorts Timeshare	\$5,000.00	\$0.00	\$5,000.00	
Debtor 1 o Debtor 2 o Debtor 1 a At least on Check if th	State ZIP Code debt? Check one. nly	As of the date you file, the claim is:  Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Other (including a right to offset)	mortgage or secured	car loan)		
Date debt was	-	Last 4 digits of account number				
Maintonanco	Foos					

Add the dollar value of your entries in Column A on this page. Write that number here:

\$10,096.88

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$183,414.00

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 23 of 73

				1		
Fill in this inf	ormation to i	dentify your c	ase:			
Debtor 1	Edwin	E	Billingsley			
	First Name	Middle Name	Last Name			
Debtor 2	Tonja	М	Billingsley			
(Spouse, if filing)		Middle Name	Last Name			
United States Bar	nkruptcy Court fo	the: WESTERN	I DIST. OF NORTH CAROLINA			
Case number				_	Objects to the test of the	
(if known)					Check if this is amended filing	an
Official Form	106E/F					
Schedule E/	F: Creditor	s Who Have	e Unsecured Claims			12/15
on Schedule A/B: Do not include an If more space is n to this page. On t	Property (Officially creditors with eeded, copy the he top of any ad	al Form 106A/B) a partially secured Part you need, fi ditional pages, w	acts or unexpired leases that coul and on Schedule G: Executory Couloims that are listed in Schedule II it out, number the entries in the write your name and case number (secured Claims	ntracts and Unexpired D: Creditors Who Ho boxes on the left. Atl	l Leases (Offici Id Claims Secu	al Form 106G). red by Property.
		unsecured clair				
		unsecured cian	ns against you!			
✓ No. Got ☐ Yes.	.0 Fait 2.					
claim. For ear show both pric more space is	ch claim listed, id ority and nonprior	entify what type of ty amounts. As m ty unsecured clair	creditor has more than one priority uf claim it is. If a claim has both prior nuch as possible, list the claims in al ns, fill out the Continuation Page of	ty and nonpriority amo phabetical order accor	unts, list that cla	im here and tor's name. If
(For an explar	nation of each typ	e of claim, see the	e instructions for this form in the inst	ruction booklet.		
,				Total claim	Priority amount	Nonpriority amount
2.1						
			Last 4 digits of account number			-
Priority Creditor's Nam	e		When was the debt incurred?			
Number Street			when was the debt incurred:			
			As of the date you file, the claim	is: Check all that appl	<b>y</b> .	
			Contingent			
			Unliquidated Disputed			
City	State	ZIP Code	ш .			
Who incurred the	debt? Check	one.	Type of PRIORITY unsecured cla	im:		
Debtor 1 only Debtor 2 only			Domestic support obligations	you awa tha gayarama	nt	
Debtor 1 and D			Taxes and certain other debts  Claims for death or personal in		i it	
<b>—</b>	the debtors and		intoxicated	, , ,		
_	claim is for a con	nmunity debt	Other. Specify			
Is the claim subject	ct to offset?					
□ No □ Yes						

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 24 of 73

Debtor 1 Debtor 2	Edwin E Billingsley Tonja M Billingsley	Case number (if known)
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims
4. List al	es  I of your nonpriority unsecured claims editor has more than one nonpriority unsec f claim it is. Do not list claims already incl	claims against you?  Submit this form to the court with your other schedules.  in the alphabetical order of the creditor who holds each claim.  cured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in insecured claims, fill out the Continuation Page of Part 2.
Ronpriority Cr PO Box 40 Number  Escondide City Who incurr Debtor Debtor Debtor At least Check	CA 92046-9046 State ZIP Code red the debt? Check one. 1 only	\$15,735.63  Last 4 digits of account number 5 8 4 0  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for -
4.2  Barclays  Nonpriority Cr P.O. Box 8	editor's Name	\$1,601.00  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated
Debtor Debtor Debtor At least Check	State ZIP Code red the debt? Check one. 1 only	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ☐ Credit Card

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 25 of 73

After flisting any entries on this page, number them sequentially from the provious page.    As   Some   St.   Inc.   St.   St	Debtor 1 Edwin E Billingsley Tonja M Billingsley	Case number (if known)	
BorrowersFirst, Inc. Norpitoric Crederic Name PO Box 2580 Number Sirest Norpitoric Crederic Name PO Box 2580 Number Sirest Number Sirest Norpitoric Crederic Name Number Sirest Number S	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Source   Street   S		m sequentially from the	Total claim
Nonpromy Creditor's Name	4.3		\$7,758.00
Number   Street   S	BorrowersFirst, Inc.	Last 4 digits of account number	
Number   Street		When was the debt incurred?	
Uniquidated   Disputed		As of the date you file, the claim is: Check all that apply.	
Disputed   Disputed		=	
Omaha NE 88103  City			
Who incurred the debt? Check one.  Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  As of the date you file, the claim is: Check all that apply. Capital One Nonpriority Creditor's Name Attr. General Correspondence Number Street  As of the date you file, the claim is: Check all that apply. Debtor 1 and Debtor 2 only Also street  As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt is the claim subject to offset?  As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt is the claim subject to offset?  As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt is the claim subject to offset?  As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt is the claim subject to offset?  As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt is the claim subject to offset?  As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt is the claim subject to offset?  As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt is the claim subject to offset?  Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 and Debtor 3 and another Check if this claim is for a community debt is the claim is for			
Debtor 1 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only   Debtor 1 and Debtor 3 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   No   Yes   Debtor 2 only   Debtor 1 only   No   Yes   Debtor 3 only   Debtor 1 only   No   No   No   Debtor 2 only   Debtor 1 only   No   No   No   No   No   No   No   N	•	Type of NONPRIORITY unsecured claim:	
Debtor 2 only			
Debtor 1 and Debtor 2 only	<b>=</b>		
All least one of the debtors and another   Check if this claim is for a community debt is the claim subject to offset?   Also   Capital One   Check one   Check one   Check one   Check offset?   Also   Check offset   Check one   Che	Debtor 1 and Debtor 2 only		
is the claim subject to offset?    No   Yes			
At least one of the debtor 2 only   Check off this claim is for a community debt is the claim subject to offset?   Norpriority Creditor's Name   Last 4 digits of account number   Meneral Correspondence   When was the debt incurred?   As of the date you file, the claim is: Check all that apply.   Check one.   Debtor 1 and Debtor 2 only   Debtor 2 only   Check one.   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Student Loans   Obligations or profit-sharing plans, and other similar debts   Check one.   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority cla	Check if this claim is for a community debt	Other	
Ves			
At   Last 4 digits of account number	E		
Capital One Nonpriority Creditor's Name Nonpriority Credit			
As of the date you file, the claim is: Check all that apply.	4.4		\$1,376.07
Attris. General Correspondence Number Street P.O. Box 30285    Contingent   Unliquidated   Disputed	Capital One	Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply.		When was the debt incurred?	
Salt Lake City UT 84130-0285  City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Street Shoppionty Creditor's Name PO Box 94014  Number Street Street As of the debtors and another Unliquidated Disputed Student loans  Palatine IL 60094-4014  City State ZIP Code Who incurred the debtor's Check one.  Debtor 1 only Debtor 2 only Officer Specify Creditor's Name PO Box 94014  Number Street As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  \$4,661.00  \$4,661.00  \$4,661.00  \$4,661.00  \$4,661.00  State ZIP Code Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset?	Number Street	As of the date you file, the claim is: Check all that apply.	
Salt Lake City UT 84130-0285 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Yes  State ZIP Code Type of NONPRIORITY unsecured claim: □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Yes □ At least one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Yes □ At East one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Yes □ At East Adjits of account number □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Yes □ No □ Yes □ No □ Yes □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Check if this claim is for a community debt is the claim subject to offset? □ Check if this claim is for a community debt is the claim subject to offset? □ Check if this claim is for a community debt is the claim subject to offset? □ No	P.O. Box 30285		
Salt Lake City UT 84130-0285 City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  Who make Freedom Cardmember Services Nonpriority Creditor's Name PO Box 94014 Number Street  Check one. Debtor 1 only State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 onloy Debtor 2 only Debtor 1 onloy Debtor 1 onloy Check if this claim is for a community debt ls the claim subject to offset?  Nonpriority Creditor's Name Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Check if this claim is for a community debt ls the claim subject to offset?  No No Norwick of Norwick o			
Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes  4.5 □ Chase Freedom Cardmember Services Nonpriority Creditor's Name PO Box 94014 Number Street □ Debtor 1 only □ Creditic Card □ Debtor 1 only □ Creditic Card □ Debtor 1 only □ Debtor 1	Salt Lake City UT 84130-0285	Disputed	
Debtor 1 only		Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  4.5  Chase Freedom Cardmember Services Nonpriority Creditor's Name PO Box 94014 Number Street  Palatine LL 60094-4014 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No No No Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  No Yes  4.5  Chase Freedom Cardmember Services Nonpriority Creditor's Name PO Box 94014 Number Street  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NoNPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  No  No  No  No  No  No  No  No  No  N	<b></b>		
At least one of the debtors and another   Check if this claim is for a community debt is the claim subject to offset?    No   Yes	·		
Check if this claim is for a community debt Is the claim subject to offset?  No No Yes  4.5  Chase Freedom Cardmember Services Nonpriority Creditor's Name PO Box 94014  Number Street  Palatine IL 60094-4014  City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  Noor No No Check if this claim is for a community debt Is the claim subject to offset?  Credit Card  St4,661.00  \$44,661.00  St4,661.00  St4,661.00  State 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Vother. Specify Credit Card	At least one of the debtors and another		
No	☐ Check if this claim is for a community debt	Credit Card	
Yes   \$4.5   \$4,661.00	•		
\$4,661.00  Chase Freedom Cardmember Services Nonpriority Creditor's Name PO Box 94014 Number Street  Mas of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  New No incurred the debt of the debt			
Chase Freedom Cardmember Services Nonpriority Creditor's Name PO Box 94014  Number Street  Palatine IL 60094-4014  City State ZIP Code Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			
Nonpriority Creditor's Name PO Box 94014  Number Street  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Type of NONPRIORITY unsecured claim:  Type of NONPRIORITY unsecured claim:  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	4.5		\$4,661.00
Number Street    Street   Street   Street   Street   Contingent   Unliquidated   Disputed		Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	_ ' '	When was the debt incurred?	
Palatine   L   60094-4014   Disputed   Disputed   Disputed   Type of NONPRIORITY unsecured claim:  Who incurred the debt? Check one.   Student loans   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Credit Card   Credit		As of the date you file, the claim is: Check all that apply.	
Palatine IL 60094-4014  City State ZIP Code Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset? □ No			
Palatine  IL 60094-4014  City State ZIP Code Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset? □ No  Type of NONPRIORITY unsecured claim:  Type of NONPRIORITY unsecured claim:  Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card			
Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset? □ No			
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No		Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No  Obligations arising out of a separation agreement of divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No			
At least one of the debtors and another  Check if this claim is for a community debt  Credit Card  Is the claim subject to offset?	Debtor 1 and Debtor 2 only		
☐ Check if this claim is for a community debt  Credit Card  Is the claim subject to offset?  No	At least one of the debtors and another		
☑ No	☐ Check if this claim is for a community debt		
	☑ No ☐ Yes		

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 26 of 73

Debtor 1 Edwin E Billingsley Tonja M Billingsley	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$364.00
Kay Jewelers/Sterling Jewlers	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 1799 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Akron OH 44309	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Other	
Is the claim subject to offset?		
☑ No		
Yes		
4.7		\$79.00
Kross, Lieberman & Stone	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred?	
991 Aviation Parkway, Suite 30		
Number Street	As of the date you file, the claim is: Check all that apply.  Contingent	
	Unliquidated	
	Disputed	
Morrisville         NC         27560           City         State         ZIP Code	Time of NONDRIODITY was a suned alaims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Collecting for -	
Is the claim subject to offset?  ✓ No		
Yes		
4.8		\$105.00
Medical Data Systems, Inc.	Last 4 digits of account number	
Nonpriority Creditor's Name 2001 9th Ave., Suite 312	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Verno Beach FL 32960	— — Бізраїєч	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  ☐ Debtor 1 only	Student loans	
Debtor 1 only  Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collecting for -	
Is the claim subject to offset?	-	
No		
☐ Yes		

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 27 of 73

Debtor 1 Edwin E Billingsley Tonja M Billingsley	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$112.00
Medical Data Systems, Inc.	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
2001 9th Ave., Suite 312 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Verno Beach FL 32960	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	Student loans	
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Collecting for -	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.10		\$1,433.00
Merrick Bank	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 660702	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Dallas TX 75266-0702	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify  Credit Card	
Is the claim subject to offset?		
✓ No		
Yes		
4.11		*404.00
	Look A divide of account number	\$161.00
Security Collection Agency, Inc. Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	
3200 Croasdaile Dr., Suite 205		
Number Street	As of the date you file, the claim is: Check all that apply.	
Dumbana NO 07707	Disputed	
Durham         NC         27705           City         State         ZIP Code	Type of NONDRIORITY unsecured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this slaim is fan a sammunitu dabt	Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset?  ✓ No		
Yes Yes		

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 28 of 73

Debtor 1 Debtor 2	Edwin E Billingsley Tonja M Billingsley	Case number (if known)				
Part 2:	Your NONPRIORITY Unsecured Claims Continuation Page					
After listin	ng any entries on this page, number the	m sequentially from the	Total claim			
<u> </u>	Jage.					
4.12			\$19,250.00			
	ccurity Administration Creditor's Name	Last 4 digits of account number				
Office of	the General Counsel, Region IV	When was the debt incurred?				
Number Atlanta F	Street ederal Center, Suite 20T45	<ul> <li>As of the date you file, the claim is: Check all that apply.</li> <li>         □ Contingent     </li> </ul>				
	th St., SW	Unliquidated				
Atlanta	GA 30303-8920	— ☑ Disputed				
City	State ZIP Code	Type of NONPRIORITY unsecured claim:				
	red the debt? Check one. r 1 only	Student loans				
	r 2 only	Obligations arising out of a separation agreement or divorce				
Debtor	r 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts				
ш	st one of the debtors and another	☑ Other. Specify				
_	if this claim is for a community debt	Other				
Is the clair	m subject to offset?					
Yes						
Alleged o	overpayment of social security					
4.13			\$454.00			
SYNCB/A	Amazon	Last 4 digits of account number	<u> </u>			
Nonpriority C PO Box 9	Creditor's Name	When was the debt incurred?				
Number	Street	As of the date you file, the claim is: Check all that apply.				
		_ Contingent				
		☐ Unliquidated ☐ ☐ Disputed				
Orlando City	FL 32896 State ZIP Code	—				
•	red the debt? Check one.	Type of NONPRIORITY unsecured claim:				
بغا	1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce				
_	r 2 only r 1 and Debtor 2 only	that you did not report as priority claims				
ш	st one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
☐ Check	if this claim is for a community debt					
Is the clair	m subject to offset?					
☑ No						
☐ Yes						

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 29 of 73

Debtor 1 Edwin E Billingsley Debtor 2 Tonja M Billingsley	Case number (if known)			
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page			
After listing any entries on this page, number them sequentially from the previous page.				
4.14		\$1,860.00		
SYNCB/HH Gregg	Last 4 digits of account number			
Nonpriority Creditor's Name P.O. Box 965004	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	_ Contingent			
	☐ Unliquidated ☐ ☐ Disputed			
Orlando FL 32896-5004				
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:			
Debtor 1 only	Student loans			
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>			
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts			
At least one of the debtors and another	☑ Other. Specify			
Check if this claim is for a community debt	Credit Card			
Is the claim subject to offset?				
☑ No □ Yes				
4.15		\$6,067.00		
SYNCB/Lowes	Last 4 digits of account number			
Nonpriority Creditor's Name P.O. Box 965060	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	_ Contingent			
	☐ Unliquidated ☐ ☐ Disputed			
Orlando FL 32896				
City State ZIP Code	Type of NONPRIORITY unsecured claim:			
Who incurred the debt? Check one.  ☐ Debtor 1 only	Student loans			
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>			
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts			
At least one of the debtors and another	☑ Other. Specify			
Check if this claim is for a community debt	Credit Card			
Is the claim subject to offset?				
☑ No □ Yes				
4.16		\$1,002.00		
SYNCB/Paypal	Last 4 digits of account number			
Nonpriority Creditor's Name PO Box 105972	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	_ Contingent			
	☐ Unliquidated ☐ ☐ Disputed			
Atlanta GA 30348-5972				
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:			
Debtor 1 only	Student loans			
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>			
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts			
At least one of the debtors and another	✓ Other. Specify			
Check if this claim is for a community debt	Credit Card			
Is the claim subject to offset?				
☑ No □ Yes				

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 30 of 73

Debtor 1 Edwin E Billingsley Tonja M Billingsley	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.17		\$4,263.00
SYNCB/Sams Club	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 965060	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	— ☐ Disputed	
Orlando         FL         32896           City         State         ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Credit Card	
No		
Yes		
4.18		
	Look A divide of cooking to the	\$683.00
SYNCB/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. Box 965004	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
Outom do	Disputed	
Orlando         FL         32896-5004           City         State         ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify  Credit Card	
Is the claim subject to offset?	3.54.1.54.14	
<b>☑</b> No		
Yes		
4.19		\$1,609.00
SYNCB/Walmart	Last 4 digits of account number	<u>Ψ1,009.00</u>
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 965004 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
Orlando FL 32896-5004	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
1 1 100		

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 31 of 73

Debtor 1 Edwin E Billingsley Tonja M Billingsley	Case number (if known)	Case number (if known)		
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page			
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim		
The Home Depot/CBNA Nonpriority Creditor's Name PO Box 6497 Number Street	Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent	<u>\$849.00</u>		
Sioux Falls City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card			

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 32 of 73

Debtor 1 Debtor 2	Edwin E Billingsle Tonja M Billingsle			Case number (if known)
Part 3:	List Others to E	Be Notified Abo	ut a Debt That You Already	y Listed
For exa credito debts t	ample, if a collection a r in Parts 1 or 2, then hat you listed in Parts ots in Parts 1 or 2, do	agency is trying to list the collection a s 1 or 2, list the add	collect from you for a debt you on a debt you on a debt you have agency here. Similarly, if you haw litional creditors here. If you do not this page.	a debt that you already listed in Parts 1 or 2. owe to someone else, list the original ave more than one creditor for any of the onot have additional parties to be notified for Part 2 did you list the original creditor?
PO Box 98	<b>1540</b> Street		Line of (Check one): Credit Card	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
El Paso City	TX State	<b>79998-1540</b> ZIP Code	Last 4 digits of account num	ber
Brock & So Name 5431 Olear Number S			_	Part 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
<b>Wilmingto</b> City	n NC State	<b>28403</b> ZIP Code	<ul><li>Last 4 digits of account num</li></ul>	ber
Name PO Box 30 Number S	Street		On which entry in Part 1 or F  Line of (Check one):  Credit Card  Last 4 digits of account num	Part 2: Creditors with Nonpriority Unsecured Claims
Salt Lake (City  First Prem Name P.O. Box 5 Number	State ier Bank	84130 ZIP Code	_	Part 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Sioux Falls	S SD State	57117-5524	— Last 4 digits of account num —	ber
<sub>Name</sub> Centralize	evenue Service d Solvency Operati <sup>Street</sup> 46	on	_	Part 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Philadelph City	ia PA State	<b>19101-7346</b> ZIP Code	<ul><li>Last 4 digits of account num</li></ul>	ber

Debtor 1

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 33 of 73

	dwin E Billingsle onja M Billingsle	-		Case number (if known)
Part 3:	_ist Others to E	Be Notified Ab	out a Debt That You Alread	y Listed Continuation Page
King's Creek	Plantation		On which entry in Part 1 or	Part 2 did you list the original creditor?
Name 191 Cottage ( Number Street			Line of (Check one): Other	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Williamsburg City Surrendered	VA State timeshare	<b>23185</b> ZIP Code	—— Last 4 digits of account nun	nber
Kohls Depart	ment Store		On which entry in Part 1 or	Part 2 did you list the original creditor?
P.O. Box 3118 Number Stree			Line of (Check one): Credit Card	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Milwaukee City	WI State	<b>53201</b> ZIP Code	—— Last 4 digits of account nun	nber
Lending Club Name 71 Stevenson Number Stree	St., Suite 300		On which entry in Part 1 or Line of (Check one): Personal Line of Credit	Part 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
San Francisc City	o CA State	<b>94105</b> ZIP Code	—— Last 4 digits of account nun	nber
Macy/DSNB			On which entry in Part 1 or	Part 2 did you list the original creditor?
PO Box 8066 Number Stree	et		Line of (Check one): Credit Card	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Mason City	OH State	<b>45040</b> ZIP Code	Last 4 digits of account nun	nber
	County Tax Offi	ce	On which entry in Part 1 or	Part 2 did you list the original creditor?
Name PO Box 36819 Number Stree			Line of (Check one). Taxes	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Charlotte City	NC State	<b>28236</b> ZIP Code	—— Last 4 digits of account nun	nber
Midland Cred	it Management I	nc.	On which entry in Part 1 or	Part 2 did you list the original creditor?
Name 8875 Aero Dr. Number Stree			Line of (Check one):  Collecting for -	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
San Diego	<b>CA</b> State	<b>92123</b> ZIP Code	—— Last 4 digits of account nun	nber
Amazon				

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 34 of 73

Debtor 1 Debtor 2	Edwin E Billin Tonja M Billin	-				Case number (if known)
Part 3:	List Others	s to B	e Notified Abou	ut a Debt That Yo	ou Already	Listed Continuation Page
North Card	olina Departm	ent of I	Revenue	On which entry i	n Part 1 or P	art 2 did you list the original creditor?
Name P.O. Box 8	71			Line of (	Check one):	Part 1: Creditors with Priority Unsecured Claims
	Street			1040 Taxes		Part 2: Creditors with Nonpriority Unsecured Claims
		NC	27602	<ul> <li>Last 4 digits of a</li> </ul>	ccount numb	ber
Raleigh City		State	ZIP Code	_		
Shell Card				On which entry i	n Part 1 or P	art 2 did you list the original creditor?
PO Box 64	06			Line of (	Check one):	Part 1: Creditors with Priority Unsecured Claims
Number S	Street			Credit Card		Part 2: Creditors with Nonpriority Unsecured Claims
Ciaux Fall		en.	E7447	<ul> <li>Last 4 digits of a</li> </ul>	ccount numb	ber
Sioux Falls City	5	State	<b>57117</b> ZIP Code	<u> </u>		
	nam Narron D	rake S	aintsing	On which entry i	n Part 1 or P	art 2 did you list the original creditor?
Name PO Box 26	268			Line of (	Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Number 5	Street			Collecting for -	,	Part 2: Creditors with Nonpriority Unsecured Claims
Raleigh		NC	27611-6268	<ul> <li>Last 4 digits of a</li> </ul>	ccount numb	ber
City		State	ZIP Code	_		
WEBBNK/	Fingerhut			On which entry i	n Part 1 or P	art 2 did you list the original creditor?
6250 Ridge	ewood Rd			Line of (	Check one):	Part 1: Creditors with Priority Unsecured Claims
Number S	Street			Credit Card		Part 2: Creditors with Nonpriority Unsecured Claims
Saint Clou	d	MN	56303	<ul> <li>Last 4 digits of a</li> </ul>	ccount numb	ber
City	u	State	ZIP Code	<u> </u>		
Wells Farg	jo			On which entry i	n Part 1 or P	art 2 did you list the original creditor?
Name P.O. Box 5	284			Line of (	Check one):	Part 1: Creditors with Priority Unsecured Claims
Number S	Street			Credit Card		Part 2: Creditors with Nonpriority Unsecured Claims
Caroletroa	m	11	60197-5284	<ul> <li>Last 4 digits of a</li> </ul>	ccount numb	ber

### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 35 of 73

Edwin E Billingsley Tonja M Billingsley	Case number (if known)
 _	

Part 4: Add the Amounts for Each Type of Unsecured Claim

<sup>6.</sup> Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. 🖣	\$0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. <b>-</b>	\$69,422.70
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$69,422.70

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 36 of 73

Fill in this inf	ormation to iden			
Debtor 1	Edwin First Name	<b>E</b> Middle Name	Billingsley Last Name	
Debtor 2 (Spouse, if filing)	Tonja First Name	M Middle Name	Billingsley Last Name	
United States Ba	nkruptcy Court for the			
Case number (if known)				Check if this is an amended filing

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 37 of 73

Fill in this	information to	identify your case	:	
Debtor 1	Edwin	E	Billingsley	
	First Name	Middle Name	Last Name	
Debtor 2	Tonja	M	Billingsley	
(Spouse, if f	iling) First Name	Middle Name	Last Name	
United State	s Bankruptcy Court fo	or the: WESTERN DIS	ST. OF NORTH CAROLINA	
Case numbe	er			
(if known)				Check if this is an amended filing
Official Fo	orm 106H • H: Your Cod	ebtors		12/1
page. On the	top of any Addition	al Pages, write your n		the left. Attach the Additional Page to this own). Answer every question.  se as a codebtor.)
2. Within th	ne last 8 years, have	•	• • •	y? (Community property states and territories xas, Washington, and Wisconsin.)
Yes	Go to line 3.  Did your spouse, fo No Yes	rmer spouse, or legal e	quivalent live with you at the ti	me?
person s creditor	nn 1, list all of your o shown in line 2 agair on <i>Schedule D</i> (Offi	n as a codebtor only if	that person is a guarantor of edule E/F (Official Form 106E	tor if your spouse is filing with you. List the r cosigner. Make sure you have listed the //F), or <i>Schedule G</i> (Official Form 106G). Use
Colun	nn 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
	Wills			☐ Schedule D, line
—— Name <b>7532</b>	Grabill Dr.			<u> </u>
Numbe				Schedule E/F, line 5.9
				Schedule G, line
Char	lotte	NC	28269	Macy/DSNB
City		State	7ID Code	

### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 38 of 73

Fill in this inforr	nation to identify				
Debtor 1	Edwin First Name	<b>E</b> Middle Name	Billingsley Last Name	_ Che	eck if this is:
Debtor 2 (Spouse, if filing)	Tonja First Name	<b>M</b> Middle Name	Billingsley Last Name	-   -	An amended filing
United States Bank	United States Bankruptcy Court for the:		WESTERN DIST. OF NORTH CAROLINA		A supplement showing postpetition chapter 13 income as of the following date
Case number (if known)					MM / DD / YYYY

#### Official Form 106I

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1.	Fill in your employment information.		Debto	or 1			Debtor 2 or nor	n-filing spou	se
	If you have more than one job, attach a separate page with information about	Employment status	_	Employed Not employed			<ul><li>✓ Employed</li><li>✓ Not employ</li></ul>	/ed	
	additional employers.	Occupation	Subs	titute Schoo	l Teach	ner	Customer Ser	rvice	
	Include part-time, seasonal, or self-employed work.	Employer's name	Rans	on Middle S	chool/C	смѕ	Convergys		
	Occupation may include student or homemaker, if it applies.	Employer's address	5850 Statesville Rd.  Number Street		Number Street	Freeman I	Or.		
			Char	lotte	NC	28269	Charlotte	NC	28262
			City		State	Zip Code	City	State	Zip Code
		How long employed th	nere?	10 years			Begins '	11/8/17	

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$767.89	\$1,820.00
3.	Estimate and list monthly overtime pay.	3	÷\$0.00	\$0.00_
4.	Calculate gross income. Add line 2 + line 3.	4.	\$767.89	\$1,820.00

	otor 1 Edwin E Billingsley Tonja M Billingsley		Case num	nber (if known)	
		ı	For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here	4.	\$767.89	\$1,820.00	
5.	List all payroll deductions:		<b>^</b>	4000 77	
	5a. Tax, Medicare, and Social Security deductions	5a.	\$75.72	\$282.75	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e. Insurance	5e.	\$0.00	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$0.00	\$0.00	
	5h. Other deductions.  Specify:	5h. <b>+</b>	\$0.00	\$0.00	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	6.	\$75.72	\$282.75	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$692.17	\$1,537.25	
8.	List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$169.30	\$0.00	
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.				
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	\$0.00	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$1,910.00	\$1,092.00	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income. Specify: Contribution from Mom	8h. <b>+</b>	\$0.00	\$290.00	
9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$2,079.30	\$1,382.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,771.47	+ \$2,919.25	\$5,690.72
11.	State all other regular contributions to the expenses that you list in So Include contributions from an unmarried partner, members of your householder friends or relatives.			r roommates, and othe	r
	Do not include any amounts already included in lines 2-10 or amounts that	are no	ot available to pay e	xpenses listed in Sche	dule J.
	Specify:			11. <b>+</b>	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11.				\$5,690.72
	income. Write that amount on the Summary of Your Assets and Liabilities if it applies.			ormation,	Combined monthly income
13.	Do you expect an increase or decrease within the year after you file the	nis for	m?		
	<ul><li>No.</li><li>✓ Yes. Explain:</li></ul> See continuation sheet.				

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 40 of 73

Debtor 1	Edwin E Billingsley		
Debtor 2	Tonja M Billingsley	Case number (if known)	

13. Expected increase or decrease within the year after you file this form:

The male debtor's income fluctuates based upon available hours. As a substitute school teacher, the male debtor does not get paid when school is not in session in 7/2017 & 8/2017. The male debtor drives for Lyft, Inc. to supplement the debtors' income. The income reflected on Schedule I is an average income generated from Lyft over a 6 month period. The income reflected on Schedule I is the average income from his paystubs over the 6 month period from 5/1/17-10/31/17 used for the means test calculations. The female debtor just started a new job on 11/8/17 at Convergys making \$10.50 per hour. The deductions on Schedule I are an estimate of the anticipated deductions. The female debtor anticipates her social security disability income to be reduced in 2/2018 due to her increased income from her new job.

Official Form 106I Schedule I: Your Income page 3

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 41 of 73

Debtor 1 Debtor 2	Edwin E Billingsley Tonja M Billingsley		Case number (if known)	
8a. Attache	ed Statement (Debtor 1)			
		Lyft		
Gross Mo	nthly Income:			\$169.30
Expense		Category	Amount	
Total Mon	thly Expenses			\$0.00
Net Month	nly Income:			\$169.30

Official Form 106I Schedule I: Your Income page 4

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 42 of 73

F	ill in this inform	nation to identi	fy your case:		Char	ck if this is:		
	Debtor 1	Edwin	E	Billingsley		An amend		
		First Name	Middle Name	Last Name		A supplem	nent showing	
	Debtor 2 (Spouse, if filing)	<b>Tonja</b> First Name	M Middle Name	Billingsley Last Name		chapter 13 following o	B expenses as late:	s of the
	United States Bankr	uptcy Court for the:	WESTERN DIST. O	F NORTH CAROLINA		MM / DD /	YYYY	_
	Case number (if known)					, 22 ,		
0	fficial Form 10	16J			_			
S	chedule J: Yo	 our Expense	S					12/15
СО	rrect information. If	f more space is ne		e are filing together, both a eet to this form. On the to				
F	Part 1: Descri	be Your House	hold					
1.	Is this a joint case	e?						
2.	No	ebtor 2 live in a se	eparate household? e Official Form 106J-2, E No	xpenses for Separate House				
	Do not list Debtor	1 and	Yes. Fill out this information for each dependent			to Do	ependent's ge	Does dependent live with you?
	Debtor 2.			Mother			0	□ No - 🔽 Yes
	Do not state the de names.	ependents'						□ No
								Yes
								□ No - □ Yes
								□ No
								Yes
								□ No - □ Yes
3.	Do your expenses expenses of peop yourself and your	ole other than	☑ No □ Yes					
F	Part 2: Estima	ate Your Ongoi	ng Monthly Expens	es				
Es to	timate your expens	es as of your bank of a date after the	ruptcy filing date unles	s you are using this form a his is a supplemental Sche	-	-	-	
			n government assistanc Schedule I: Your Incon	e if you know the value of ne (Official Form 106l.)			Your expens	es
4.			enses for your residence any rent for the ground or			4.		
	If not included in		, 11 111 9.003 01					
	4a. Real estate ta	axes				4a.		
	4b. Property, hon	neowner's, or renter	's insurance			4b.		
	4c. Home mainte	nance, repair, and	upkeep expenses			4c.		\$83.00
	4d. Homeowner's	association or con	dominium dues			4d.		\$14.00

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 43 of 73

Deb Deb	tor 1 Edwin E Billingsley Tonja M Billingsley Case number	er (if known)	
		Your exp	enses
5.	Additional mortgage payments for your residence, such as home equity loans	5	
	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$300.00
	6b. Water, sewer, garbage collection	6b	\$75.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$400.00
	6d. Other. Specify:	6d.	
	Food and housekeeping supplies	7	\$500.00
	Childcare and children's education costs	8	
-	Clothing, laundry, and dry cleaning	9.	\$100.00
0.	Personal care products and services	10.	\$50.00
1.	Medical and dental expenses (See continuation sheet(s) for details	) 11	\$1,200.00
2.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$200.0
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13	\$150.0
4.	Charitable contributions and religious donations	14	
5.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$197.10
	15d. Other insurance. Specify: See continuation sheet	15d	\$331.00
6.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	
7.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a	
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify:	17c	
	17d. Other. Specify:	17d	
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	
9.	Other payments you make to support others who do not live with you.  Specify:	19.	

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 44 of 73

	tor 1 tor 2	Edwin E Billingsley Tonja M Billingsley	Case number (if knowr	ı)
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	. Specify:	21.	
22.	Calcu	alate your monthly expenses.	_	
	22a.	Add lines 4 through 21.	22a.	\$3,600.10
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	. 22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$3,600.10
23.	Calcu	slate your monthly net income.	_	
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$5,690.72
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>_</b>	\$3,600.10
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$2,090.62
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you	u file this form?	
		cample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your mortga	. ,	
	=	Yes. Explain here: See continuation sheet.		

### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 45 of 73

Debtor 1 Debtor 2	Edwin E Billingsley Tonja M Billingsley	Case number (if knov	vn)
	cal and dental (details): cipated Cost of Prescriptions		\$1,200.00
		Total:	\$1,200.00
15d. <u>Other</u>	r insurance (details):		
Antic	cipated Cost of Medicare Part D		\$331.00
		Total:	\$331.00

#### 24. Expected increase or decrease in expenses within the year after you file this form:

Both debtors receive Medicaid; however, the debtors anticipate their Medicaid ending once the female debtor begins her new job. Once Medicaid ends the debtors will need to purchase new health insurance. The budget provides an allowance for the health insurance and estimated out of pocket medical expenses that the debtors will be responsible for paying.

### Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 46 of 73

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$122,100.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$28,856.75
	1c. Copy line 63, Total of all property on Schedule A/B	\$150,956.75
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$183,414.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$69,422.70
	Your total liabilities	\$252,836.70
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$5,690.72
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,600.10

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 47 of 73

Debtor 1 Debtor 2		Edwin E Billingsley Tonja M Billingsley	Case number (if known)	
I	Part 4:	Answer These Questions for Administrative and	Statistical Records	
6.	Are yo	ou filing for bankruptcy under Chapters 7, 11, or 13?		
	ш.	o. You have nothing to report on this part of the form. Check this les	box and submit this form to the court with your	other schedules.
7.	What k	kind of debt do you have?		
	ك	our debts are primarily consumer debts. Consumer debts are the mily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9		personal,
		<b>our debts are not primarily consumer debts.</b> You have nothing is form to the court with your other schedules.	to report on this part of the form. Check this b	oox and submit
8.		the <b>Statement of Your Current Monthly Income:</b> Copy your total I Form 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1	•	\$878.12
9.	Copy t	the following special categories of claims from Part 4, line 6 of	Schedule E/F:	

	Total claim							
From Part 4 on Schedule E/F, copy the following:								
9a. Domestic support obligations. (Copy line 6a.)	\$0.00							
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00							
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00							
9d. Student loans. (Copy line 6f.)	\$0.00							
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00							
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00							
9g. <b>Total.</b> Add lines 9a through 9f.	\$0.00							

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 48 of 73

	Doo	cument Page 48	OT 73	
ormation to i	dentify your case	e:		
Edwin First Name	<b>E</b> Middle Name	Billingsley Last Name		
Tonja First Name	<b>M</b> Middle Name	Billingsley Last Name	_	
nkruptcy Court fo	r the: WESTERN DIS	ST. OF NORTH CAROLIN	<u>A</u>	
			☐ Check if this is an amended filing	
106Dec				
About an I	ndividual Debi	tor's Schedules		12/15
ple are filing too	gether, both are equa	illy responsible for supplyin	g correct information.	
rty, or obtaining	money or property b	y fraud in connection with a	a bankruptcy case can result in fines up to	
n Below				
or agree to pay s	omeone who is NOT	an attorney to help you fill	out bankruptcy forms?	
ame of person			Attach Bankruptcy Petition Preparer's No. Declaration, and Signature (Official Form	- 4.
	Edwin First Name  Tonja First Name akruptcy Court fo  106Dec About an In ple are filing tog form whenever ty, or obtaining sonment for up  n Below or agree to pay s	Edwin E First Name Middle Name  Tonja M First Name Middle Name  Middle Name  Nkruptcy Court for the: WESTERN DI  About an Individual Debi  ple are filing together, both are equal form whenever you file bankruptcy s ty, or obtaining money or property b sonment for up to 20 years, or both.  In Below  Or agree to pay someone who is NOT	Edwin E Billingsley First Name Middle Name Last Name  Tonja M Billingsley First Name Middle Name Last Name  Akruptcy Court for the: WESTERN DIST. OF NORTH CAROLIN  MESTERN DIST. OF NORTH CAROLIN  Debtor's Schedules  Ple are filing together, both are equally responsible for supplying form whenever you file bankruptcy schedules or amended schety, or obtaining money or property by fraud in connection with a sonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 151  The Below  The response of the property of the prope	Edwin E Billingsley First Name Middle Name Last Name  Tonja M Billingsley First Name Middle Name Last Name  Akruptcy Court for the: WESTERN DIST. OF NORTH CAROLINA  Check if this is an amended filling  106Dec  About an Individual Debtor's Schedules  ple are filling together, both are equally responsible for supplying correct information.  form whenever you file bankruptcy schedules or amended schedules. Making a false statement, ty, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to sonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  In Below  In agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Edwin E Billingsley
Edwin E Billingsley, Debtor 1

X /s/ Tonja M Billingsley
Tonja M Billingsley, Debtor 2

Date 11/09/2017 Date 11/09/2017 MM / DD / YYYYY

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 49 of 73

Fill in this inf	ormation to	identify your case	):		
Debtor 1	Edwin	E	Billingsley		
202101	First Name	Middle Name	Last Name		
Debtor 2	Tonja	М	Billingsley		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court fo	or the: WESTERN DI	ST. OF NORTH CAROLINA		
Case number					
(if known)				☐ Check if this is an amended filing	
Official Form	107				
		l Affaire for Inc	lividuals Filing for Ba	ankruntov	04/16
	i i illalicia	Allalia loi ille	ilviduais i illing for Be	лікі артоу	04/10
_	,	nown). Answer every out Your Marital S	Status and Where You Liv	ved Before	
1. What is your  ☑ Married ☐ Not marrie	<b>current marital</b>	status?			
	st 3 years, have	you lived anywhere	other than where you live now?	<b>?</b>	
☑ No ☐ Yes. List	all of the places	you lived in the last 3	years. Do not include where you	live now.	
(Community p		•	• .	ommunity property state or territory? na, Nevada, New Mexico, Puerto Rico, Texas	S,
✓ No	ra aura vau fill	it Sahadula H. Verii Ci	adaptava (Official Form 1001)		
☐ res. Mak	le sure you illi ol	it scriedule n. Your Co	odebtors (Official Form 106H).		

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 50 of 73

	otor 1 otor 2	Edwin E Billingsley Tonja M Billingsley		Case nur	mber (if known)	
Р	art 2:	Explain the Sources of	Your Income			
4.	Fill in the	u have any income from employ ne total amount of income you rec are filing a joint case and you have	eived from all jobs and all bus	sinesses, including par	t-time activities.	endar years?
	□ No ☑ Ye	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ary 1 of the current year until u filed for bankruptcy:	Wages, commissions, bonuses, tips	\$9,852.92	Wages, commissions, bonuses, tips	\$0.00
			Operating a business		Operating a business	
For	the last	calendar year:	✓ Wages, commissions, bonuses, tips	\$13,368.00	Wages, commissions, bonuses, tips	\$11,776.00
(Jai	nuary 1 t	o December 31,	Operating a business		Operating a business	
For	the cale	endar year before that:	₩ Wages, commissions, bonuses, tips	\$9,930.00	Wages, commissions, bonuses, tips	\$17,864.00
(Jai	nuary 1 t	o December 31, 2015 )	Operating a business		Operating a business	
5.	Include unemp and ga Debtor	u receive any other income durities income regardless of whether that loyment; and other public benefit   mbling and lottery winnings. If you 1.	at income is taxable. Example payments; pensions; rental incurate in a joint case and you h	es of other income are come; interest; dividend ave income that you re	ds; money collected from law eceived together, list it only o	wsuits; royalties;
	□ No ✓ Ye	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
		ary 1 of the current year until u filed for bankruptcy:	Social Security	\$21,010.00	Social Security	\$6,484.00
		calendar year: o December 31, 2016	Social Security	\$22,173.80	Social Security	\$5,182.40
		endar year before that: o December 31, 2015 )	Social Security	\$23,568.80		
		YYYY				

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 51 of 73

Debtor 1 Debtor 2		E Billingsle M Billingsle	•		Case number (if kno		vn)	
Part 3:	List	Certain Pa	nyments You M	lade Before \	∕ou Filed for Ba	ınkruptcy		
6. Are e	either Deb	tor 1's or Del	otor 2's debts prin	narily consume	debts?			
□ <sup>1</sup>			·		mer debts. Consur		d in 11 U.S.C. § 101(8) as	
	Durir	ng the 90 days	s before you filed fo	or bankruptcy, di	d you pay any credit	tor a total of \$6,425*	or more?	
		o. Go to line	7.					
	_ Y	total amo	ount you paid that c	reditor. Do not i	nclude payments for	nore in one or more pr domestic support ol attorney for this banl	oligations, such as	
	* Sul	oject to adjust	tment on 4/01/19 a	nd every 3 years	after that for cases	filed on or after the o	late of adjustment.	
<b>☑</b> Y	es. <b>Deb</b> t	or 1 or Debto	or 2 or both have	primarily consu	mer debts.			
	Durir	ng the 90 days	s before you filed fo	or bankruptcy, di	d you pay any credit	tor a total of \$600 or	more?	
		o. Go to line	7.					
	<b>⊠</b> Y	creditor.	Do not include pay	yments for dome		re and the total amou ons, such as child su case.  Amount you still owe		
lyundai	Capital A	merica		paymont	\$1,486.93	\$38,703.00	☐ Mortgage	
		r., Suite 19	00	10/3 \$736. — 8/24 \$750	93		☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors	
rvine		C	A 92612 ate ZIP Code				Other	
Inside corporagen such	ers include prations of t, including as child su	efore you file your relative which you are	ed for bankruptcy s; any general part e an officer, directo siness you operate mony.	ners; relatives of r, person in conti	any general partner ol, or owner of 20%	rs; partnerships of wl or more of their votir	e who was an insider?  nich you are a general partner;  ng securities; and any managing  s for domestic support obligations	

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 52 of 73

		lwin E Billingsley onja M Billingsley		Case numbe	er (if known) _		
8.	benefited a	an insider?	or bankruptcy, did you make any paymen	ts or transfer any p	oroperty on a	ccount of a d	ebt that
	Include pay	ments on debts guara	inteed or cosigned by an insider.				
	✓ No ☐ Yes. L	ist all payments that b	enefited an insider.				
P	art 4:	dentify Legal Act	ions, Repossessions, and Foreclo	sures			
9.	List all such		or bankruptcy, were you a party in any law ersonal injury cases, small claims actions, di tes.			-	-
	□ No ☑ Yes. F	ill in the details.					
Cas	e title		Nature of the case	Court or agency		Sta	tus of the case
Syr	nchrony Ba	ank v. Billingsley	Collection action	Mecklenburg C	ounty Distr	ict Court	─ Pending
				Court Name 832 E. 4th St.			
				Number Street			_ ☐ On appeal
Cas	e number 1	7 CVD 16480	-				_
				Charlotte	NC	28202	
				City	State	ZIP Code	_
Cas	e title		Nature of the case	Court or agency		Sta	tus of the case
		ty Administration	The female debtor is pursuing a	Office of Disab			tus of the ouse
		,	claim against the Social Security	Review	,,		✓ Pending
			Administration regarding alleged	Court Name			On appeal
Cas	e number		overpayment of social security	2201 Coronatio	n Blvd.		_
ouc	_		and potential backpay owed to the female debtor. The case is	Number Street			
			currently pending and awaiting	Charlotte	NC	28227	_
			hearing before an Administrative Law Judge.	City	State	ZIP Code	_
10.	seized, or	•	or bankruptcy, was any of your property r	epossessed, forec	closed, garnis	shed, attached	d,
	سنا	o to line 11. ill in the information be	elow.				

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 53 of 73

	otor 1 otor 2	Edwin E Bill Tonja M Bill	_	-	Case number	(if known)	
11.		•	-		ruptcy, did any creditor, including a bank or financi o make a payment because you owed a debt?	al institution, set off an	у
	☑ No □ Yes	s. Fill in the det	ails.				
12.		-			ptcy, was any of your property in the possession o custodian, or another official?	an assignee for the be	enefit of
	✓ No	S					
Pa	art 5:	List Certa	in G	ifts and Co	ntributions		
13.	Within	2 years before	you	filed for bankr	uptcy, did you give any gifts with a total value of m	ore than \$600 per perso	on?
	✓ No ☐ Yes	s. Fill in the det	ails fo	or each gift.			
14.		2 years before charity?	you	filed for bankr	uptcy, did you give any gifts or contributions with a	total value of more tha	an \$600
	☑ No □ Yes	s. Fill in the det	ails fo	or each gift or c	contribution.		
Pa	art 6:	List Certa	in L	osses			
15.		1 year before y lisaster, or gar			ptcy or since you filed for bankruptcy, did you lose	anything because of the	heft, fire,
	☑ No □ Yes	s. Fill in the def	ails.				
Pa	art 7:	List Certa	in P	ayments or	Transfers		
16.	anyone	you consulte	d abo	out seeking ba	ptcy, did you or anyone else acting on your behalf nkruptcy or preparing a bankruptcy petition? oreparers, or credit counseling agencies for services re	•	
	□ No ☑ Yes	s. Fill in the det	ails.				
	v Office	e of Kimberly Vas Paid	A. S	heek	Description and value of any property transferred The debtors paid a total of \$1060 representi \$750 attorney fees and \$310 filing fee.		Amount of payment
P.O Num	D. Box 4 ober Str	80740 eet			-	10/27/17	\$1,060.00
Cha	arlotte		NC State	<b>28269</b> ZIP Code	-		_
ww		klawoffice.co			_		
Ema	il or websi	te address					
Dorc	on Mho M	Ando the Dayment	if Not	Vou	_		

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 54 of 73

	otor 1 otor 2	Edwin E Billir Tonja M Billir	-					Case nun	nber (if kn	own)		
17.	anyone	1 year before your who promised include any payn	to help	you deal v	with your credit	ors or to m	_	-			orope	erty to
	□ No ✓ Yes	s. Fill in the deta	ils.									
	edom D	<b>Debt Relief</b> Vas Paid			Description a Paid a total to negotiate	of \$628 pe	er month f	rom 9/16		Date payment or transfer wa made		Amount of payment
PO Num	Box 23 nber Str	eet			received a r –	refund of a	pproxima	tely \$423	•	9/16-9/17	—	\$7,536.00
Pho	oenix	<b>A</b> Z Sta		35002 (IP Code	_							
18.	propert	2 years before y ty transferred in both outright trai	the or	dinary cou	rse of your bus	iness or fin	ancial affai	rs?				
19.	✓ No ☐ Yes Within you are	s. Fill in the deta  10 years before a beneficiary?	ils. <b>you fil</b> (The	ed for bank	cruptcy, did you	ı transfer aı	ny property	to a self-s	settled tru	st or similar de	evice	of which
P	□ Yes	List Certain		ancial Ac	counts, Instr	uments, \$	Safe Depo	osit Box	es, and	Storage Uni	ts	
20.	benefit Include	1 year before yo , closed, sold, n checking, saving , pension funds,	<b>noved,</b> gs, mor	or transfer ney market,	red? or other financia	ıl accounts;	certificates o	of deposit;				
	✓ No	s. Fill in the deta	ils.									
21.	-	now have, or d urities, cash, or	-		n 1 year before	you filed fo	r bankrupto	cy, any saf	e deposit	box or other d	lepos	sitory
	✓ No	s. Fill in the deta	ils.									
22.	<b>☑</b> No	ou stored prope	•	a storage u	nit or place oth	er than you	r home with	nin 1 year ∣	before yo	u filed for bank	crupt	cy?

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 55 of 73

	otor 1 otor 2	Edwin E Billingsley Tonja M Billingsley	Case number (if known)
P	art 9:	Identify Property You Hold or Control for Someone Els	e
23.	-	hold or control any property that someone else owns? Include any p in trust for someone.	roperty you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	
P	art 10:	Give Details About Environmental Information	
or	the purp	ose of Part 10, the following definitions apply:	
ı	hazardou	nental law means any federal, state, or local statute or regulation con s or toxic substance, wastes, or material into the air, land, soil, surfa statutes or regulations controlling the cleanup of these substances,	ce water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environmer or used to own, operate, or utilize it, including disposal sites.	tal law, whether you now own, operate, or
		<i>is material</i> means anything an environmental law defines as a hazarde, hazardous material, pollutant, contaminant, or similar item.	ous waste, hazardous substance, toxic
Rep	ort all no	otices, releases, and proceedings that you know about, regardless of	when they occurred.
24.	Has any law?	governmental unit notified you that you may be liable or potentially	iable under or in violation of an environmental
	✓ No ☐ Yes	. Fill in the details.	
25.	☑ No	ou notified any governmental unit of any release of hazardous materia . Fill in the details.	1?
26.	Have you	ou been a party in any judicial or administrative proceeding under any	environmental law? Include settlements and
	✓ No ☐ Yes	. Fill in the details.	

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 56 of 73

Debtor 1 Edwin E Billingsley Tonja M Billingsley	Ca	ase number (if known)					
Part 11: Give Details About Yo	our Business or Connections to Any	Business					
27. Within 4 years before you filed for b business?	ankruptcy, did you own a business or have a	ny of the following connections to any					
A member of a limited liability  A partner in a partnership  An officer, director, or manage  An owner of at least 5% of the	loyed in a trade, profession, or other activity, eithy company (LLC) or limited liability partnership (light ging executive of a corporation e voting or equity securities of a corporation.  Go to Part 12.  and fill in the details below for each business.						
Edwin Billingsley	Describe the nature of the business Lyft/Uber driver	Employer Identification number Do not include Social Security number or ITIN.					
Business Name 7532 Grabill Dr. Number Street	Name of accountant or bookkeeper	EIN:					
Charlotte NC 28269  City State ZIP Code	-	From To					
Priority Customer Care LLC	Describe the nature of the business  Customer service representative over the phone at home, notary, and loan	Employer Identification number Do not include Social Security number or ITIN.					
7532 Grabill Dr. Number Street	signing agent. No money has been made from the business  Name of accountant or bookkeeper	EIN: <u>4</u> <u>6</u> – <u>1</u> <u>5</u> <u>9</u> <u>9</u> <u>0</u> <u>3</u> <u>0</u> Dates business existed					
Charlotte NC 28269 City State ZIP Code	-	From <u>12/2014</u> To <u>Present</u>					
28. Within 2 years before you filed for b all financial institutions, creditors, c	ankruptcy, did you give a financial statement or other parties.	to anyone about your business? Include					

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 57 of 73

Debtor 1 Debtor 2	Edwin E Billingsley Tonja M Billingsley	Case number (if known)
Part 12	Sign Below	
that answe	ers are true and correct. I unders	of Financial Affairs and any attachments, and I declare under penalty of perjury stand that making a false statement, concealing property, or obtaining money or kruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, 3571.
	vin E Billingsley E Billingsley, Debtor 1	X /s/ Tonja M Billingsley Tonja M Billingsley, Debtor 2
Date _	11/09/2017	Date11/09/2017
Did you at	tach additional pages to Your Sta	tement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes		
Did you pa	y or agree to pay someone who	is not an attorney to help you fill out bankruptcy forms?
✓ No ☐ Yes. N	lame of person	Attach the Bankruptcy Petition Preparer's Notice,

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
   Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee

+ \$75 administrative fee

\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

### Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Bankruptcy/Resources/ApprovedCreditAndDebtCounselors.aspx.}{}$ 

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 62 of 73

B2030 (Form 2030) (12/15)

# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF NORTH CAROLINA CHARLOTTE DIVISION

In re	Edwin E Billingsley	Case No.	
	Tonja M Billingsley		
		Chapter	13

	<b>.</b>	apto	<u></u>
	DISCLOSURE OF COMPENSATION OF ATTORNE	Y FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorthat compensation paid to me within one year before the filing of the petition in bankru services rendered or to be rendered on behalf of the debtor(s) in contemplation of or its as follows:	ıptcy, or	agreed to be paid to me, for
	For legal services, I have agreed to accept	\$	\$4,500.00
	Prior to the filing of this statement I have received		\$750.00
	Balance Due	\$	3,750.00
2.	The source of the compensation paid to me was:		
	✓ Debtor		
3.	The source of compensation to be paid to me is:		
	☐ Debtor ☑ Other (specify)  To be paid as an administrative claim through	ıgh the	plan
4.	I have not agreed to share the above-disclosed compensation with any other personassociates of my law firm.	son unle	ess they are members and
	☐ I have agreed to share the above-disclosed compensation with another person o associates of my law firm. A copy of the agreement, together with a list of the nar compensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspe	ects of the	he bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in de	eterminir	ng whether to file a petition in

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 63 of 73

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Chapter 13: See Local Form 3

Chapter 7: Motions to avoid judicial lien, motion to avoid non-possessory, non purchase money security interest, motion for authority to sell property, motion to settle claim with Trustee, defense of motion for relief from stay, post discharge injunction actions, defense or prosecution of adversary proceedings, case conversion, case reopening, preparation of reaffirmation agreement or attendance of the hearing, any other matter not covered by the base fee.

CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.						
11/09/2017 Date	Isl Kimberly A. Sheek  Kimberly A. Sheek Law Office of Kimberly A. Sheek P.O. Box 480740 Charlotte, NC 28269 www.sheeklawoffice.com	Bar No. 34199				

/s/ Edwin E Billingsley	/s/ Tonja M Billingsley
Edwin E Billingsley	Tonja M Billingsley

Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 64 of 73

# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF NORTH CAROLINA CHARLOTTE DIVISION

IN RE: Edwin E Billingsley

Date <u>11/9/2017</u>

CASE NO

Tonja M Billingsley

CHAPTER 13

#### **VERIFICATION OF CREDITOR MATRIX**

	The above named Debtor hereby verifies that the	attached list of creditors is true and correct to the best of his/her
knowl	edge.	
Date	11/9/2017	Signature /s/ Edwin E Billingsley
		Edwin E Billingsley

Signature /s/ Tonja M Billingsley

Tonja M Billingsley

American Express PO Box 981540 El Paso, TX 79998-1540

ARS National Services, Inc. PO Box 469046 Escondido, CA 92046-9046

Barclays Bank DE P.O. Box 8801 Wilmington, DE 19899

BorrowersFirst, Inc. PO Box 2580 Omaha, NE 68103

Brock & Scott, PLLC 5431 Oleander Dr. Wilmington, NC 28403

Capital One Attn: General Correspondence P.O. Box 30285 Salt Lake City, UT 84130-0285

Capital One Auto Finance 7933 Preston Rd. Plano, TX 75024

Chase Freedom Cardmember Services PO Box 94014 Palatine, IL 60094-4014

Discover Card Services, Inc. PO Box 30421 Salt Lake City, UT 84130 First Premier Bank P.O. Box 5524 Sioux Falls, SD 57117-5524

Hyundai Capital America 3161 Michelson Dr., Suite 1900 Irvine, CA 92612

Internal Revenue Service Centralized Solvency Operation PO Box 7346 Philadelphia, PA 19101-7346

Kay Jewelers/Sterling Jewlers PO Box 1799 Akron, OH 44309

King's Creek Plantation 191 Cottage Cove Ln Williamsburg, VA 23185

Kohls Department Store P.O. Box 3115 Milwaukee, WI 53201

Kross, Lieberman & Stone 991 Aviation Parkway, Suite 30 Morrisville, NC 27560

Lending Club Corp. 71 Stevenson St., Suite 300 San Francisco, CA 94105

Macy/DSNB PO Box 8066 Mason, OH 45040 Mary Wills 7532 Grabill Dr. Charlotte, NC 28269

Mecklenburg County Tax Office PO Box 36819 Charlotte, NC 28236

Medical Data Systems, Inc. 2001 9th Ave., Suite 312 Verno Beach, FL 32960

Merrick Bank PO Box 660702 Dallas, TX 75266-0702

Midland Credit Management Inc. 8875 Aero Dr., Suite 200 San Diego, CA 92123

North Carolina Department of Revenue P.O. Box 871 Raleigh, NC 27602

Ocwen Loan Servicing, LLC PO Box 24737 West Palm Beach, FL 33416-4737

Security Collection Agency, Inc. 3200 Croasdaile Dr., Suite 205 Durham, NC 27705

Shell Card PO Box 6406 Sioux Falls, SD 57117 Smith Debnam Narron Drake Saintsing PO Box 26268 Raleigh, NC 27611-6268

Social Security Administration Office of the General Counsel, Region IV Atlanta Federal Center, Suite 20T45 61 Forsyth St., SW

Southbeach Resorts 3000 S. Ocean Blvd. Myrtle Beach, SC 29577

SYNCB/Amazon PO Box 965060 Orlando, FL 32896

SYNCB/HH Gregg P.O. Box 965004 Orlando, FL 32896-5004

SYNCB/Lowes P.O. Box 965060 Orlando, FL 32896

SYNCB/Paypal PO Box 105972 Atlanta, GA 30348-5972

SYNCB/Sams Club PO Box 965060 Orlando, FL 32896

SYNCB/Walmart P.O. Box 965004 Orlando, FL 32896-5004 The Home Depot/CBNA PO Box 6497 Sioux Falls, SD 57117

WEBBNK/Fingerhut 6250 Ridgewood Rd Saint Cloud, MN 56303

Wells Fargo P.O. Box 5284 Carolstream, IL 60197-5284

	Case	: 17-31632		cument Page 70 c	if 73	34.08 Desc N	iaiii
G	ill in this inf	formation to i	dentify your case	e:	Check as	directed in lines 17	' and 21:
D	ebtor 1	Edwin First Name	<b>E</b> Middle Name	Billingsley Last Name	According to Statement:	the calculations required	by this
(5	ebtor 2 Spouse, if filing)		M Middle Name	Billingsley  Last Name  IST. OF NORTH CAROLINA	under 1	able income is not determ 1 U.S.C. § 1325(b)(3). able income is determine 1 U.S.C. § 1325(b)(3).	
c	ase number f known)		, u.e. <u>weerenve</u>		3. The con	nmitment period is 3 yea	
່ Of	ficial Form	122C-1			☐ Check if t	his is an amended filing	
an Be acc info	as complete a curate. If more prmation applic	nd accurate as p space is needed es. On the top of	nmitment Per possible. If two marr d, attach a separate	ied people are filing together, sheet to this form. Include the es, write your name and case r	line number to v	which the additional	12/15
1.			g status? Check one				
	☐ Not mar	ried. Fill out Colu	ımn A, lines 2-11.				
	Married.	. Fill out both Col	umns A and B, lines 2	2-11.			
	bankruptcy of August 31. If	the amount of yo	§ 101(10A). For exan our monthly income va	ved from all sources, derived on the property of the property	per 15, the 6-mon e income for all 6	th period would be March months and divide the to	n 1 through otal by 6. Fill
	income from t	that property in or	•	ı have nothing to report for any li	ne, write \$0 in the	e space.	partitio
	income from t	that property in or	•	•	ne, write \$0 in the  Column A  Debtor 1	Column B Debtor 2 or non-filing spouse	paraie
2.	Your gross w		ne column only. If you	•	Column A	Column B Debtor 2 or	paraie

		Debtor 1	Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$708.82	\$0.00
3.	Alimony and maintenance payments. Do not include payments from a spouse.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$0.00	\$0.00

Net income from operating a business, profession, or farm

	Debtor 1	Debtor 2		
Gross receipts (before all	\$169.30	\$0.00		
deductions)				
Ordinary and necessary operating -	\$0.00	\$0.00		
expenses			Сору	
Net monthly income from a business	\$169.30	\$0.00	here <b>\$</b> \$169.30	\$0.00

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 71 of 73

Deb <sup>o</sup>		Edwin E Billingsley Tonja M Billingsley			c	ase number (if k	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
6.	Net	income from rental and other r	eal property					
			Debtor 1	Debtor 2				
	Gro	ss receipts (before all	\$0.00	\$0.00				
		uctions)	- \$0.00	_ \$0.00				
		nary and necessary operating -	Ψ0.00		Сору			
		monthly income from rental or r real property	\$0.00	\$0.00	here →	\$0.00	\$0.00	
7.	Inte	rest, dividends, and royalties				\$0.00	\$0.00	
8.	Une	mployment compensation				\$0.00	\$0.00	
		not enter the amount if you contel efit under the Social Security Act.						
		or you		· · · · · · · · · · · · · · · · · · ·	_			
		or your spouse			00_			
9.		sion or retirement income. Do a benefit under the Social Secur	•	ount received that		\$0.00	\$0.00	
11.	<b>Cal</b> d	al amounts from separate pages, culate your total average month lines 2 through 10 for each colur n add the total for Column A to th	ily income. nn.	В.	<u> </u>	\$878.12	+ \$0.00	\$878.12  Total average monthly income
Pá	art 2	Determine How to M	easure Your Do	eductions fron	n Income	9		
12.	Cop	y your total average monthly ir	come from line 1	1				\$878.12
13.	Cal	culate the marital adjustment.	Check one:					
		You are not married. Fill in 0 be You are married and your spous You are married and your spous Fill in the amount of the income of you or your dependents, such than you or your dependents. Below, specify the basis for excinecessary, list additional adjusting the property of the proper	e is filing with you. e is not filing with y listed in line 11, Co as payment of the uding this income a ments on a separat	/ou. olumn B, that was N e spouse's tax liabil and the amount of	ity or the s	pouse's support o	of someone other	
		If this adjustment does not apply	/, enter U below.					
				·		\$0.00 Copy	y here	_ \$0.00
							,	
14.	You	r current monthly income. Sub	tract the total in lin	e 13 from line 12.				\$878.12

# Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 72 of 73

	otor 1 otor 2		Edwin E Billingsley Tonja M Billingsley  Case number (if known)				
15.	Calculate your current monthly income for the year. Follow these steps:						
	15a. Copy line 14 here ->			\$878.12			
		Mu	tiply line 15a by 12 (the number of months in a ye	ear).	X	12	
	15b.	The	e result is your current monthly income for the yea	ar for this part of the form	\$10,537.44		
16.	Calculate the median family income that applies to you. Follow these steps:						
			in the state in which you live.	North Carolina			
	16b.	Fill	in the number of people in your household.	3			
		Fill in the median family income for your state and size of household		ze of household		\$64,977.00	
	100.	То	go online using the link specified in the separate able at the bankruptcy clerk's office.	····· <u> </u>	<u>*************************************</u>		
17.	How	do t	ne lines compare?				
	17a.	Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposable income is not determined under 11 U.S.C.</i> § 1325(b)(3). <b>Go to Part 3.</b> Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2).					
	17b.			age 1 of this form, check box 2, <i>Disposable income is determin</i> ut Calculation of Your Disposable Income (Official Form 12: only income from line 14 above.			
P	art 3:		Calculate Your Commitment Period U				
18.	Copy	by your total average monthly income from line 11				\$878.12	
19.	<b>Deduct the marital adjustment if it applies.</b> If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.						
	19a.	If th	ne marital adjustment does not apply, fill in 0 on li	ne 19a	<b>-</b>	\$0.00	
	19b.	Su	otract line 19a from line 18.			\$878.12	
20.	Calc	ulate	ulate your current monthly income for the year. Follow these steps:				
	20a.	Со	by line 19b		···· _	\$878.12	
		Mu	tiply by 12 (the number of months in a year).		X	12	
	20b.	The	e result is your current monthly income for the year	ar for this part of the form.	L	\$10,537.44	
	20c.	Со	by the median family income for your state and size	ze of household from line 16c.	[	\$64,977.00	
21.	How do the lines compare?						
	بنا		20b is less than line 20c. Unless otherwise order k box 3, <i>The commitment period is 3 years</i> . Go to	· · · ·			
	_		20b is more than or equal to line 20c. Unless oth				

## Case 17-31832 Doc 1 Filed 11/09/17 Entered 11/09/17 11:34:08 Desc Main Document Page 73 of 73

Debtor 1 Debtor 2	Edwin E Billingsley Tonja M Billingsley	Case number (if known)						
Part 4:	Sign Below							
By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.								
<b>X</b> /s/	Edwin E Billingsley	X /s/ Tonja M Billingsley						
	vin E Billingsley, Debtor 1	Tonja M Billingsley, Debtor 2						
Date	e 11/9/2017	Date_ <b>11/9/2017</b>						
	MM / DD / YYYY	MM / DD / YYYY						

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.